Case 16-11187 Doc 1 Filed 03/31/16 Entered 03/31/16 16:10:55 Desc Main Document Page 1 of 72 United States Bankruptcy Court Northern District of Illinois, Eastern Division

| IN RE: | | Case No |
|-----------------------------|--|---|
| Pletz, Chad D | | Chapter 7 |
| | Debtor(s) | • |
| | VERIFICATION OF CREDI | TOR MATRIX |
| | | Number of Creditors16 |
| The above-named Debtor(s) h | ereby verifies that the list of creditors is | true and correct to the best of my (our) knowledge. |
| Date: March 31, 2016 | /s/ Chad D Pletz | |
| | Debtor | |
| | | |
| | Joint Debtor | |

Baxter Credit Union 340 N Milwaukee Ave Vernon Hills, IL 60061-0000

Best Buy PO Box 5893 Carol Stream, IL 60197-0000

Capital One PO Box 30285 Salt Lake City, UT 84130-0000

Credit First PO Box 81410 Cleveland, OH 44181-0410

First Bankcard PO Box 2557 Omaha, NE 68103-0000

Home Depot PO Box 6497 Sioux Falls, SD 57117-0000

JC Penney
PO Box 533
Dallas, TX 75221-0000

Kohls PO Box 3043 Milwaukee, WI 53201-0000

Lowe's PO Box 2510 Tuscaloosa, AL 35403-0000

Quicken Loans 1050 Woodward Ave Detroit, MI 48226-1906

Sears Bankruptcy Recovery PO Box 3671 Des Moines, IA 50322-0000

Sonia Pletz 210 Stillwater Dr Hainesville, IL 60030-4129

Target Card Services PO Box 660170 Dallas, TX 75266-0000

Walmart
PO Box 965024 Attn: Bankruptcy Dept
Orlando, FL 32896-0000

Wells Fargo Dealer Services PO Box 17900 Denver, CO 80217-0900

Wells Fargo Dealer Services PO Box 1790 Denver, CO 80201-1790 $_{B201B\;(Form\;2}\text{Case}_{12/9}\text{6-11187}$

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Document Page 5 of 72 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

| IN RE: | | Case No |
|---------------|-----------|-----------|
| Pletz, Chad D | | Chapter 7 |
| | Debtor(s) | |

| | OF NOTICE TO CONSUMER (b) OF THE BANKRUPTCY | * * |
|---|--|--|
| Certificate of [Nor | -Attorney] Bankruptcy Petitio | on Preparer |
| I, the [non-attorney] bankruptcy petition preparer sign notice, as required by § 342(b) of the Bankruptcy Cod | | rtify that I delivered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition Address: | Preparer | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) |
| x | | (Required by 11 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer of officer, partner whose Social Security number is provided about | | |
| | Certificate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received | and read the attached notice, as req | uired by § 342(b) of the Bankruptcy Code. |
| Pletz, Chad D | X /s/ Chad D Pletz | 3/31/2016 |
| Printed Name(s) of Debtor(s) | Signature of Debt | Date Date |
| Case No. (if known) | x | |
| | Signature of Joint | Debtor (if any) |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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| Fill in this informa | ation to identify your o | ase: | | | | |
|---------------------------------|-----------------------------------|---|---------------------|---|---------------------|---|
| Debtor 1 | Chad D Pletz | | | | | |
| | First Name | Middle Name | | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | | Last Name | | |
| United States Bank | kruptcy Court for the: | NORTHERN DIS | TRICT OF ILL | INOIS, EASTERN DIVIS | SION | |
| | auptoy Court for the. | | | | | |
| Case number | | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| | | | | | | |
| Official For | m 108 | | | | | |
| Statemen | t of Intentio | n for Indi | viduals | Filing Unde | er Chapte | r 7 12/15 |
| Otatomon | t or intontio | - III III III III III III III III III I | · iaaaio | i iiiig onac | <u> </u> | 12/13 |
| If you are an indivi | dual filing under chap | ter 7, you must fill | out this form | if: | | |
| _ | claims secured by you | | | | | |
| | d personal property ar | | | hankruntev netition or | by the date set fo | r the meeting of creditors, |
| whicheve | | | | | | editors and lessors you list on |
| the form | | | | | | |
| | ple are filing together the form. | in a joint case, bot | h are equally | responsible for supply | /ing correct inform | nation. Both debtors must sign |
| Be as complete an | d accurate as possible | e. If more space is | needed, attac | ch a separate sheet to t | this form. On the t | op of any additional pages, |
| | ır name and case num | | , | | | - p |
| Part 1: List You | ır Creditors Who Have | Secured Claims | | | | |
| | | | Creditors W | no Have Claims Secure | ad by Property (Of | ficial Form 106D), fill in the |
| information belo | ow. | | | | | , |
| Identify the cred | litor and the property th | iat is collateral | What do y secures a | ou intend to do with th debt? | e property that | Did you claim the property as exempt on Schedule C? |
| | | | | | | |
| Creditor's We | ells Fargo Dealer S | ervices | ☐ Surrend | er the property. | | □ No |
| name: | . | | | the property and redeer | n it. | <u>_</u> |
| Description of | 2011 Dodge Grand | l Caravan | _ | he property and enter into | o a Reaffirmation | ■ Yes |
| property | zorr zougo cruno | - Cararan | Agreer. ☐ Retain t | nent. he property and [explain] | : | |
| securing debt: | | | | | | |
| | | | | | | |
| Creditor's We | ells Fargo Dealer S | ervices | ☐ Surrend | er the property. | | ■ No |
| name: | • | | | the property and redeer | n it. | |
| Description of | 2005 Toyota Corol | la | Retain t Agreen | he property and enter inte | o a Reaffirmation | ☐ Yes |
| property | • | | | he property and [explain] | : | |
| securing debt: | | | | | | |
| Part 2: List You | ır Unexpired Personal | Property Leases | | | | |
| For any unexpired | personal property lea | se that you listed i | | | | eases (Official Form 106G), fill in |
| | | | | re leases that are still i ot assume it. 11 U.S.C. | | period has not yet ended. You |
| • | | • | | | | ACII dha lagaa ha aasaa 10 |
| Describe your une | expired personal prop | erty leases | | | V | Will the lease be assumed? |
| Lessor's name: | | | | | | |

Official Form 108

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| Debtor 1 Pletz, Chad D | Case number (if known) |
|--|---|
| | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my inte property that is subject to an unexpired lease. | ention about any property of my estate that secures a debt and any personal |
| X /s/ Chad D Pletz | x |
| Chad D Pletz Signature of Debtor 1 | Signature of Debtor 2 |
| Date March 31, 2016 | Date |

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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|--|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Chad First name D | First name | |
| | license or passport). | Middle name | Middle name | |
| | Bring your picture identification to your meeti with the trustee. | ing Pletz Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have used in the last 8 years | e | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-6350 | | |

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Debtor 1 Pletz, Chad D Document Page 9 of 72 Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | 210 Stillwater Dr Hainesville, IL 60030-4129 Number, Street, City, State & ZIP Code Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any | If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

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Debtor 1 Pletz, Chad D

| ar | t 2: Tell the Court About Y | our E | Bankruptcy Ca | se | | | | | | | |
|---------|--|---|---|--|--|---|------------------------------|--|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | | | |
| | choosing to file under | Chapter 7 | | | | | | | | | |
| | | | Chapter 11 | | | | | | | | |
| | | □ Chapter 12 | | | | | | | | | |
| | | | Chapter 13 | | | | | | | | |
| 3. | How you will pay the fee | _ | | | | eck with the clerk's office in your loca | | | | | |
| | | | | you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or morney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a dadress. | | | | | | | |
| | | | | the fee in insta | | tion, sign and attach the Application t | or Individuals to Pay The | | | | |
| | | | I request that not required to your family size | t my fee be waive, waive your fee, ze and you are un | red (You may request this optic and may do so only if your inco able to pay the fee in installmen | on only if you are filing for Chapter 7. ome is less than 150% of the official nts). If you choose this option, you m | poverty line that applies to | | | | |
| | Harris (No. 16 a.e. | | | Chapter 7 Filing Fe | ee <i>Waived</i> (Official Form 103E | 3) and file it with your petition. | | | | | |
| €. | Have you filed for bankruptcy within the last | ■ N | 0. | | | | | | | | |
| | 8 years? | ΠY | es. | | | | | | | | |
| | | | District | | When | Case number | | | | | |
| | | | District | | When | Case number | | | | | |
| | | | District | | When | Case number | | | | | |
| 10. | Are any bankruptcy cases | ■ N | lo | | | | | | | | |
| | pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ΠY | | | | | | | | | |
| | | | Debtor | | | Relationship to you | | | | | |
| | | | District | | When | Case number, if known | own | | | | |
| | | | Debtor | | | Relationship to you | | | | | |
| | | | District | | When | Case number, if kno | own | | | | |
| I1. | Do you rent your | N | lo. Go to li | ine 12. | | | | | | | |
| | residence? | ■ Y | | ur landlord obtain | ed an eviction judgment agains | st you and do you want to stay in you | r residence? | | | | |
| | | - • | ■ | No. Go to line 1: | 2. | | | | | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petiti | | n Judgment Against You (Form 101A | a) and file it with this | | | | |

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| ar | Report About Any Bus | sinesses \ | ou Own | as a Sole Proprieto | or | | | |
|-----|---|------------------------|--|--|---|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | and location of bus | iness | | | |
| | A sole proprietorship is a business you operate as an | | Name of business, if any | | | | | |
| | individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Number, Street, City, State & ZIP Code | | | | | |
| | to this petition. | | Check | the appropriate box | x to describe your business: | | | |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broker | r (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | s. If you inc | dicate that you are a sow statement, and fed | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11 | | | |
| | | ■ No. | I am r | not filing under Chap | oter 11. | | | |
| | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | • | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| ar | t 4: Report if You Own or | Have Any | Hazardo | us Property or Any | Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable | ☐ Yes. | What is | the hazard? | | | | |
| | hazard to public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | | | |
| | | | | | Number, Street, City, State & Zip Code | | | |

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Debtor 1 Pletz, Chad D

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

| n approved credit |
|--------------------------------|
| the 180 days before I filed |
| nd I received a certificate of |
| |
| 1 |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Pletz, Chad D | | Document | Case number | er (if known) | | | | |
|------|--|--|--|--|---|--|--|--|--|
| Part | 6: Answer These Questi | ons for Repo | rting Purposes | | | | | | |
| 16. | What kind of debts do you have? | | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurre individual primarily for a personal, family, or household purpose." | | | | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | ■ Yes. Go to line 17. | | | | | | |
| | | | | iness debts? Business debts are debts through the operation of the business or in | | | | | |
| | | | No. Go to line 16c. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | 16c. S | tate the type of debts you owe | that are not consumer debts or business | debts | | | | |
| 17. | Are you filing under Chapter 7? | □ No. I | am not filing under Chapter 7. | Go to line 18. | | | | | |
| | Do you estimate that after any exempt property is excluded and | | | you estimate that after any exempt propert to distribute to unsecured creditors? | ty is excluded and administrative expenses are | | | | |
| | administrative expenses are paid that funds will be | | ■ No | | | | | | |
| | available for distribution to unsecured creditors? | С |] Yes | | | | | | |
| 18. | How many Creditors do | ■ 1-49 | | 1 ,000-5,000 | □ 25,001-50,000 | | | | |
| | you estimate that you owe? | □ 50-99 | | 5001-10,000 | ☐ 50,001-100,000 | | | | |
| | | □ 100-199 □ 200-999 | | □ 10,001-25,000 | ☐ More than100,000 | | | | |
| 19. | How much do you | □ \$0 - \$50 | 000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | | |
| | estimate your assets to be worth? | \$50,001 | | □ \$10,000,001 - \$50 million | ☐ \$1,000,000,001 - \$10 billion | | | | |
| | | □ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | | |
| | | Φ \$500,00 | - Ψ1 IIIIIIOI1 | | | | | | |
| 20. | How much do you estimate your liabilities to | □ \$0 - \$50 | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | | |
| | be? | | - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | | | |
| | | | 1 - \$500,000 1 - \$1 million | □ \$100,000,001 - \$100 million | ☐ More than \$50 billion | | | | |
| | <u></u> | | , | | | | | | |
| Part | 7: Sign Below | | | | | | | | |
| For | you | I have exam | ined this petition, and I declare | under penalty of perjury that the informat | ion provided is true and correct. | | | | |
| | | | | am aware that I may proceed, if eligible, ole under each chapter, and I choose to proceed. | under Chapter 7, 11,12, or 13 of title 11, Unite roceed under Chapter 7. | | | | |
| | | | y represents me and I did not ped and read the notice required | | n attorney to help me fill out this document, I | | | | |
| | | I request re | ief in accordance with the cha | apter of title 11, United States Code, spec | cified in this petition. | | | | |
| | | | sult in fines up to \$250,000, or | | property by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | | Chad D P Signature o | | Signature of Debto | | | | | |
| | | Executed or | a. 011 0 1, 2 0 10 | Executed on | | | | | |
| | | | MM / DD / YYYY | MN | /I / DD / YYYY | | | | |

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Paul Idias | Date | March 31, 2016 | |
|--|---------------|-----------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Paul Idlas | | | |
| Printed name | | | |
| Paul Idlas | | | |
| Firm name | | | |
| | | | |
| 1099 N Corporate Cir | | | |
| Grayslake, IL 60030-1688 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone | Email address | _paul@idlas.com | |
| 99999 | | | |
| Bar number & State | | | |

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| Deb | tor 1 Pletz, Chad D | | | Case number | er (if known) | |
|------|--|---|--|---|---|--|
| Part | 6: Answer These Question | ons for Report | ing Purposes | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurrindividual primarily for a personal, family, or household purpose." | | | | |
| | | | No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | | | ess debts? Business debts are debts to the debts to the debts are debts to the desiness or in the business or in the business or in the business or in the debts. | | |
| | , | | No. Go to line 16c. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16c. Sta | te the type of debts you owe th | nat are not consumer debts or business | debts | |
| 17. | Are you filing under Chapter 7? | □ No. I ar | n not filing under Chapter 7. (| Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. I ar pai | n filing under Chapter 7. Do yo d that funds will be available to | ou estimate that after any exempt proper of distribute to unsecured creditors? | ty is excluded and administrative expenses are | |
| | administrative expenses | | No | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | Yes | | | |
| 18. | How many Creditors do you estimate that you owe? | 1 -49 | | □ 1,000-5,000 | 25,001-50,000 | |
| | | □ 50-99 | | 5001-10,000 | ☐ 50.001-100.000 | |
| | | □ 100-199 □ 200-999 | | □ 10,001-25,000 | ☐ More than100,000 | |
| 19. | How much do you | □ \$0 - \$50,0 | 00 | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | |
| | estimate your assets to be worth? | \$50,001 - | \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | |
| | be worder | □ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | |
| 20. | How much do you | □ \$0 - \$50,0 | 00 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | |
| | estimate your liabilities to be? | \$50,001 - | | ☐ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | |
| | | \$100,001 | • | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | |
| | | \$500,001 | - \$1 million | | Wore than \$50 billion | |
| Par | 7: Sign Below | | | | | |
| For | you | I have examin | ed this petition, and I declare | under penalty of perjury that the informa | tion provided is true and correct. | |
| | | If I have chos States Code. | en to file under Chapter 7, I a l understand the relief availab | am aware that I may proceed, if eligible le under each chapter, and I choose to p | , under Chapter 7, 11,12, or 13 of title 11, United proceed under Chapter 7. | |
| | | | represents me and I did not part and read the notice required | | in attorney to help me fill out this document. I | |
| | | I request relie | ef in accordance with the chap | oter of title 11, United States Code, spe | ecified in this petition. | |
| | | | | | property by fraud in connection with a bankruptcy . 18 U.S.C. §§ 152, 1341, 1519, and 3571. | |
| | | Chad D Ple Signature of | - 11 | Signature of Debt | or 2 | |
| | | Executed on | March 31, 2016 | Executed on | | |
| | | | MM / DD / YYYY | MI | M / DD / YYYY | |

| Fill in this inform | nation to identify your | case: | | | |
|---------------------------------|--|---------------------------|--------------------------|---------------------------|-------------------------------------|
| Debtor 1 | Chad D Pletz | | | | |
| Dobtes 2 | First Name | Middle Name | Last Name | 1 | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | T OF ILLINOIS, EASTER | RN DIVISION | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| L | | | | | amended filing |
| | | | | | |
| Official Form | 106Doo | | | | |
| Official Form | | | | \ | |
| Declarat | ion About a | an Individua | Debtor's S | cnedules | 12/15 |
| If two married peo | ople are filing together | , both are equally respon | nsible for supplying co | rrect information. | |
| Vou must file this | form whenever you fi | e hankruntev schedules | or amended schedule | s. Making a false staten | nent, concealing property, or |
| obtaining money | or property by fraud is | n connection with a bank | ruptcy case can result | in fines up to \$250,000 | , or imprisonment for up to 20 |
| years, or both. 18 | 3 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | | |
| | | | | | |
| Sign | n Below | | | | |
| Did you pay | or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| — □ Yes. N | lame of person | | | Attach Ban | kruptcy Petition Preparer's Notice, |
| | | | | | , and Signature (Official Form 119) |
| | | | | | |
| | ty of perjury, I declare true and correct. | that I have read the sum | mary and schedules fil | led with this declaration | n and |
| 0.0 | 100- | ٣ | | | |
| X Chad E | Lr. B Janny | ~ | X | of Debtor 2 | 4 |
| | re of Debtor 1 | | Oignature | 0, 500tol E | |
| Date 8 | March 24 2046 | | Date | | |

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| Det | btor 1 Pletz, Chad D | | Case number(if known) |
|---------------------|--|--|---|
| | _ | | |
| | No. None of the above applies. Go to F | | |
| | ☐ Yes. Check all that apply above and fill | l in the details below for each business. | |
| | Business Name Address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Dates business existed |
| 28. | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. | tcy, did you give a financial statement to a | nyone about your business? Include all financial |
| | ■ No | | |
| | ☐ Yes. Fill in the details below. | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | |
| Par | rt 12: Sign Below | | |
| true ban 18 U | ve read the answers on this Statement of Fine and correct. I understand that making a falskruptcy case can result in fines up to \$250,00 J.S.C. §§ 152, 1341, 1519, and 3571. | e statement, concealing property, or obtai | declare under penalty of perjury that the answers are ining money or property by fraud in connection with a both. |
| Sig | • | | |
| Dat | te <u>March 31, 2016</u> | Date | |
| Did ■ N | | ent of Financial Affairs for Individuals Filin | g for Bankruptcy (Official Form 107)? |
| Did ■ N | you pay or agree to pay someone who is not | t an attorney to help you fill out bankrupto | y forms? |
| | | intov Petition Preparer's Notice, Declaration, a | and Signature (Official Form 119). |

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| Debtor 1 Pletz, Chad D | Case number (if known) |
|--|--|
| Description of leased Property: | □ No |
| Lessor's name: | ☐ Yes |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased Property: | □ No |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention about a property that is subject to an unexpired lease. | nny property of my estate that secures a debt and any personal |
| x Conal B. Plat | Signature of Debtor 2 |
| Date March 31, 2016 Date | e |

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B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| IN RE: | Case No. |
|---|--|
| Pletz, Chad D | Chapter 7 |
| Debtor(s) | |
| | NOTICE TO CONSUMER DEBTOR(S) O) OF THE BANKRUPTCY CODE |
| Certificate of [Non-A | Attorney] Bankruptcy Petition Preparer |
| I, the [non-attorney] bankruptcy petition preparer signing notice, as required by § 342(b) of the Bankruptcy Code. | g the debtor's petition, hereby certify that I delivered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition Pr Address: | petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) |
| v | (Required by 11 U.S.C. § 110.) |
| X | · · · · · · · · · · · · · · · · · · · |
| X | ncipal, responsible person, or |
| partner whose Social Security number is provided above | ncipal, responsible person, or |
| partner whose Social Security number is provided above Ce |). |
| partner whose Social Security number is provided above Ce | ertificate of the Debtor ad read the attached notice, as required by § 342(b) of the Bankruptcy Code. |
| partner whose Social Security number is provided above Ce I (We), the debtor(s), affirm that I (we) have received an | ertificate of the Debtor and read the attached notice, as required by § 342(b) of the Bankruptcy Code. X |
| Ce I (We), the debtor(s), affirm that I (we) have received an | ertificate of the Debtor and read the attached notice, as required by § 342(b) of the Bankruptcy Code. X Signature of Debtor Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

◆ 2016 CINgroup 1.866.218.1003 - CINcompass (www.cincompass.com)

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United States Bankruptcy Court Northern District of Illinois, Eastern Division

| IN RE: | | Case No. |
|-----------------------------|---|--|
| Pletz, Chad D | | Chapter 7 |
| | Debtor(s) | • |
| | VERIFICATION OF CR | REDITOR MATRIX |
| | | Number of Creditors2 |
| The above-named Debtor(s) h | ereby verifies that the list of credite | ors is true and correct to the best of my (our) knowledge. |
| Date: March 31, 2016 | Debtor Debtor | feet |
| | Joint Debtor | |

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| | 743C 10 11107 DC | Document Page 21 of | of 72 | COO MAIN |
|-------------------------------------|----------------------------------|---|--|---|
| Fill in this info | rmation to identify your cas | e and this filing: | | |
| Debtor 1 | Chad D Pletz | | | |
| Debtor 2 | First Name | Middle Name Last Name | | |
| Spouse, if filing) | First Name | Middle Name Last Name | | |
| Jnited States E | Bankruptcy Court for the: N | ORTHERN DISTRICT OF ILLINOIS, EASTERI | N DIVISION | |
| Case number | _ | | | П о тил |
| Case number | | | | ☐ Check if this is an amended filing |
| | | | | - |
| Official F | orm 106A/B | | | |
| | ıle A/B: Prope | r4\/ | | 40/45 |
| | - | ems. List an asset only once. If an asset fits in mo | ore than one category list the asset i | 12/15 |
| hink it fits best. | Be as complete and accurate a | s possible. If two married people are filing together | er, both are equally responsible for s | upplying correct |
| nformation. If m Answer every qu | | eparate sheet to this form. On the top of any addit | ional pages, write your name and cas | se number (if known). |
| | | . I Od P I F | | |
| Part 1: Describ | be Each Residence, Building, La | ind, or Other Real Estate You Own or Have an Inte | erest in | |
| . Do you own o | r have any legal or equitable in | erest in any residence, building, land, or similar p | property? | |
| ■ No. Go to F | Part 2 | | | |
| _ | e is the property? | | | |
| | o to this property. | | | |
| Part 2: Describ | pe Your Vehicles | | | |
| □ No ■ Yes | | | | |
| 3.1 Make: | Dodge | Who has an interest in the property? Check | | claims or exemptions. Put |
| Model: | Grand Caravan | Debtor 1 only | the amount of any secu | ured claims on Schedule D: laims Secured by Property. |
| Year: | 2011 | Debtor 2 only | Current value of the | Current value of the |
| Approxim | nate mileage: 9092 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Other info | ormation: | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | \$6,302.00 | \$6,302.00 |
| | Tarreta | | Do not deduct secured | claims or exemptions. Put |
| 3.2 Make: | Toyota | Who has an interest in the property? Check | the amount of any secu | ured claims on Schedule D: |
| Model: Year: | Corolla 2005 | □ Debtor 1 only □ Debtor 2 only | | laims Secured by Property. |
| | nate mileage: 10900 | | Current value of the entire property? | Current value of the portion you own? |
| | ormation: | At least one of the debtors and another | | |
| | | | | |
| | | Check if this is community property (see instructions) | \$2,016.00 | \$2,016.00 |
| | | (See instructions) | | |
| | | | | |
| | | and other recreational vehicles, other vehic watercraft, fishing vessels, snowmobiles, motoro | | |
| • | ,,, poroonar | , | ., | |
| ■ No | | | | |
| ☐ Yes | | | | |

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Pletz, Chad D 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$8.318.00 you have attached for Part 2. Write that number here.....> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Appliances, utenisls, pots and pans, couch, dresser, bed, lamps, \$850.00 chairs, table and other misc household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... DVD player, 4 TV's, desktop computer, camers, phones, IPad \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$350.00 Clothes

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

Jewelry

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No

Yes. Describe.....

Dog, 2 cats, 2 turtles

\$100.00

\$15.00

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

| Debtor 1 | Case 16-11187 Pletz, Chad D | | 03/31/16 ument | Entered 03/3 Page 23 of 72 | 31/16 16:10:55 2 Case number (if known) | Desc Main |
|--------------------|---|--|-------------------|-------------------------------|---|--|
| _ | Give specific information | | | | Case Humber (II known) | |
| □ res. | Give specific information | | | | | |
| | | your entries from Part 3, | | | you have attached for | \$1,715.00 |
| Part 4: Des | scribe Your Financial Asset | ts | | | | |
| Do you ow | n or have any legal or e | quitable interest in any o | of the following | ng? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | | ur wallet, in your home, in a | · | | en you file your petition | |
| — 163 | | | | | Cash | \$25.00 |
| Examp □ No - | | other financial accounts; cve multiple accounts with | | itution, list each. | dit unions, brokerage hous | es, and other similar |
| | 17.1. | Checking Account | Commun | ity Trust | | \$500.00 |
| | 17.2. | Savings Account | Commun | ity Trust | | \$1.00 |
| | 17.3. | Other Financial Account | Commun | ity Trust shares | | \$1.00 |
| | 17.4. | Other Financial Account | Commun | ity Trust Money N | <i>l</i> larket | \$1.00 |
| | 17.5. | Checking Account | Commun | ity Trust | | \$4.00 |
| | 17.6. | Savings Account | Commun | ity Trust | | \$5.00 |
| | mutual funds, or public ples: Bond funds, investme | ly traded stocks nt accounts with brokerage | e firms, money | market accounts | | |
| _ | | Institution or issuer name | : : | | | |
| • | iblicly traded stock and i enture | interests in incorporated | and unincor | porated businesses | , including an interest in | n an LLC, partnership, and |
| ■ Yes. | | about themme of entity: ne Warner 6 shares | | | % of ownership: | \$430.86 |
| | | bott 25 shares | | | 0.00 % | \$0.00 |

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

| D | ebtor 1 | Pletz, Chad D | Docu | ıment | Page 2 | 4 of 72 | ase number (if k | nown) | |
|----|--|--|---|---|-------------------------------|---------------|-------------------|----------------|---|
| | | rietz, Chau D | | | | | ase namber (# A | | |
| | ■ No | | | | | | | | |
| | ☐ Yes. | Give specific information | | | | | | | |
| | | Į. | ssuer name: | | | | | | |
| 21 | | ment or pension accou | | | | | | | |
| | Exam _l ☐ No | oles: Interests in IRA, El | RISA, Keogh, 401(k), 403(b), | thrift saving | s accounts, c | r other pen | sion or profit-sh | aring plans | |
| | | List each account separ | atoly | | | | | | |
| | — 163. | | be of account: | Institution i | name: | | | | |
| | | 40 | 1(k) or Similar Plan | Baxter | | | | | \$36,000.00 |
| | | IRA | Δ | Roth IRA | | | | | \$2,500.00 |
| _ | | | | - ROUITINA | | | | | Ψ2,300.00 |
| 22 | Your s Examp | | ments sits you have made so that you ndlords, prepaid rent, public u | | | | | oanies, or oth | ers |
| | ■ No | | | Institution | name or indiv | idual: | | | |
| | ☐ res. | | | motitution | iame or marv | iddai. | | | |
| 23 | _ | ies (A contract for a peri | odic payment of money to you | u, either for lif | e or for a nur | nber of year | rs) | | |
| | ■ No | | | | | | | | |
| | ☐ Yes | ssuer na | ame and description. | | | | | | |
| 24 | | ts in an education IRA, C. §§ 530(b)(1), 529A(b | in an account in a qualified), and 529(b)(1). | d ABLE prog | gram, or und | ler a qualifi | ed state tuition | program. | |
| | Yes | Institutio | n name and description. Sepa | arately file the | records of a | nv interests | .11 U.S.C. § 521 | (c): | |
| | ■ Yes | 529 | | , | | , | U | (-) | \$250.00 |
| _ | | <u> </u> | | | | | | | Ψ230.00 |
| 26 | ■ No □ Yes. Patents Examp ■ No □ Yes. Licens | Give specific informations, copyrights, trademantal of the specific informations, five specific informations, and other specific specific and other specific | rks, trade secrets, and other mes, websites, proceeds from on about them mer general intangibles | e r intellectua royalties and | al property d licensing ag | reements | | | e for your benefit |
| | Exam _l ■ No | oles: Building permits, ex | clusive licenses, cooperative | association h | noldings, liquo | or licenses, | professional lice | nses | |
| | | Give specific information | on about them | | | | | | |
| | — 103. | Oive specific information | about thom | | | | | | |
| M | oney or | property owed to you' | ? | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | . Tax ref | funds owed to you | | | | | | | |
| | ■ No | | | | | | | | |
| | ☐ Yes. | Give specific information | n about them, including wheth | er you alread | ly filed the ret | urns and th | e tax years | | |
| | | | | | | | | | |
| 29 | Examp ■ No | support oles: Past due or lump s Give specific information | um alimony, spousal support | t, child suppo | ort, maintena | nce, divorce | e settlement, pro | perty settlen | nent |
| | | | | | | | | | |
| 30 | | | es you ability insurance payments, dis made to someone else | sability benef | its, sick pay, v | vacation pay | /, workers' comp | pensation, So | ocial Security benefits; |

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| | Case 16-11187 | Doc 1 | Filed 03/31/16 Document | Entered 03/31/16 16:10:55 | Desc Main |
|---------------------------|---|---------------------------|----------------------------|--|------------------------------|
| Debtor 1 | Pletz, Chad D | | Document | Page 25 of 72 Case number (if known) | |
| ☐ Yes. | Give specific information | | | | |
| | ets in insurance policies bles: Health, disability, or life | insurance; hea | alth savings account (HS | SA); credit, homeowner's, or renter's insurance | |
| ■ No | | | | | |
| ☐ Yes. | Name the insurance compar Comp | y of each policoany name: | cy and list its value. | Beneficiary: | Surrender or refund value: |
| If you a died. | , v | | | I rance policy, or are currently entitled to receive | property because someone has |
| ☐ Yes. | Give specific information | | | | |
| Exam _p ■ No | against third parties, when bles: Accidents, employment | | | or made a demand for payment to sue | |
| | | | | | |
| 34. Other o | contingent and unliquidate | d claims of e | very nature, including | counterclaims of the debtor and rights to s | et off claims |
| ☐ Yes. | Describe each claim | | | | |
| 35. Any fin No | nancial assets you did not | already list | | | |
| ☐ Yes. | Give specific information | | | | |
| | the dollar value of all of yo 4. Write that number here | | | y entries for pages you have attached for | \$39,717.86 |
| Part 5: De | scribe Any Business-Related | Property You | Own or Have an Interest I | n. List any real estate in Part 1. | |
| 37. Do you 0 | own or have any legal or equit | able interest in | n any business-related pr | operty? | |
| ■ No. Go | to Part 6. | | | | |
| ☐ Yes. 0 | Go to line 38. | | | | |
| | scribe Any Farm- and Comme you own or have an interest in fa | | | n or Have an Interest In. | |
| | own or have any legal or | equitable into | erest in any farm- or co | ommercial fishing-related property? | |
| | Go to line 47. | | | | |
| | | | | | |
| Part 7: | Describe All Property You (| Own or Have a | n Interest in That You Did | Not List Above | |
| Exam _p ■ No | n have other property of an bles: Season tickets, country | club member | | | |
| ⊔ Yes. | Give specific information | | | | |
| 54. Add t | the dollar value of all of yo | ur entries fro | m Part 7. Write that nu | ımber here | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 5

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Document Debtor 1 Pletz, Chad D

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|-------------|------------------------------|-------------|
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$8,318.00 | | _ |
| 57. | Part 3: Total personal and household items, line 15 | \$1,715.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$39,717.86 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$49,750.86 | Copy personal property total | \$49,750.86 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$49,750.86 |

Official Form 106A/B Schedule A/B: Property page 6 Case 16-11187 Doc 1 Filed 03/31/16 Entered 03/31/16 16:10:55 Desc Main

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|----------------------------|-----|
| Debtor 1 | Chad D Pletz | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVIS | ION |
| Case number (if known) | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of | exemptions | are you | claiming? | Check | one only, | even if y | your s _l | pouse is | filing v | vith y | you. |
|----|--------------|------------|---------|-----------|-------|-----------|-----------|---------------------|----------|----------|--------|------|
|----|--------------|------------|---------|-----------|-------|-----------|-----------|---------------------|----------|----------|--------|------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | ion you own the value from Check only one box for each exemption. | | Specific laws that allow exemption |
|--|--|--------------------------------------|--|---|------------------------------------|
| | | Copy the value from Schedule A/B | | | |
| | Dodge Grand Caravan | \$6,302.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | 2011 90920 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Appliances, utenisls, pots and pans, couch, dresser, bed, lamps, chairs, | \$850.00 | | \$850.00 | 735 ILCS 5/12-1001(b) |
| | table and other misc household goods Line from Schedule A/B 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | DVD player, 4 TV's, desktop computer, camers, phones, IPad Line from Schedule A/B 7.1 | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Clothes Line from Schedule A/B 11.1 | \$350.00 | | \$350.00 | 735 ILCS 5/12-1001(b) |
| | Line Holli Genedale A/L 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Jewelry Line from Schedule A/B 12.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| | LINE HOTH SCHEUUIE AVD. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | | ount of the exemption you claim | Specific laws that allow exemption |
|---|--|----------|---|---------------------------------------|
| Dog, 2 cats, 2 turtles Line from Schedule A/B 13.1 | \$15.00 | | \$15.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Cash Line from Schedule A/B 16.1 | \$25.00 | • | \$25.00 100% of fair market value, up to | 735 ILCS 5/12-1001(b) |
| Community Trust Line from Schedule A/B: 17.1 | \$500.00 | • | \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Community Trust Line from Schedule A/B: 17.2 | \$1.00 | ■ | \$1.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Community Trust shares Line from Schedule A/B 17.3 | \$1.00 | ■ | \$1.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Community Trust Money Market Line from Schedule A/B: 17.4 | \$1.00 | | \$1.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Community Trust Line from Schedule A/B: 17.5 | \$4.00 | | \$4.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Community Trust Line from Schedule A/B: 17.6 | \$5.00 | | \$5.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Time Warner 6 shares Line from Schedule A/B: 19.1 | \$430.86 | | \$430.86 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Abbott 25 shares Line from Schedule A/B: 19.2 | \$0.00 | | \$1,026.75 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Baxter Line from Schedule A/B: 21.1 | \$36,000.00 | | \$290.39 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Baxter Line from Schedule A/B: 21.1 | \$36,000.00 | ■ □ | \$0.00 100% of fair market value, up to any applicable statutory limit | 40 ILCS 5/4-135, 5/6-213, 5/22-230 |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | | Specific laws that allow exemption | |
|---|--------------------------------------|---|---|------------------------------------|--|
| | Copy the value from Schedule A/B | | | | |
| Roth IRA Line from Schedule A/B: 21.2 | \$2,500.00 | | \$0.00 | 40 ILCS 5/4-135, 5/6-213, 5/22-230 | |
| 2.10 Holli 65,166416 7 12 2 112 | | | 100% of fair market value, up to any applicable statutory limit | 3/22 230 | |
| Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 No | | | on or after the date of adjustment.) | | |
| | | | | | |

| 3. | Are you | claiming a h | nomestead | exemption of | f more th | nan \$ | 155,675? |
|----|---------|--------------|-----------|--------------|-----------|--------|----------|
| | | | | | | | |

| | , | adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment |
|--|---|---|
| | No | |
| | Did you acquire the property covered by the exemption within 1,215 days before you filed this case? | |
| | | No |
| | | Yes |
| | | |

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| Fill | in this informa | tion to identify you | | 30 01 72 | | |
|--------------|---|---|--|-----------------------------|--|---|
| Deb | otor 1 | Chad D Pletz | NO. III. N | | | |
| Deb | otor 2 | First Name | Middle Name Last Nam | е | | |
| | use if, filing) | First Name | Middle Name Last Name | е | - | |
| Unit | ted States Bank | ruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS, EA | ASTERN DIVISION | _ | |
| | e number | | | | l — | if this is an ded filing |
| Off | icial Form | 106D | | | | |
| | | | Who Have Claims Secur | ed by Propert | ТУ | 12/15 |
| need know | ed, copy the Add n). | | f two married people are filing together, both are, number the entries, and attach it to this form. O | | | |
| | _ ` | _ | s form to the court with your other schedules. | You have nothing else to re | eport on this form. | |
| | Yes. Fill in al | I of the information be | elow. | · · | • | |
| Par | List All S | Secured Claims | | | | |
| 2. Li | ist all secured cla each claim. If more | aims. If a creditor has me than one creditor has | nore than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2. A cal order according to the creditor 's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Wells Fargo | o Dealer | Describe the property that secures the claim: | \$19,121.00 | \$6,302.00 | \$12,819.00 |
| | Creditor's Name | | 2011 Dodge Grand Caravan | 7 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | Number, Street, Coowes the debt Debtor 1 only Debtor 2 only Debtor 1 and Debt at least one of the | 9 80217-0900 itity, State & Zip Code ? Check one. or 2 only debtors and another | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lier) Judgment lien from a lawsuit | r secured | | |
| | Check if this clair community debt | | Other (including a right to offset) | | | |
| Date | e debt was incurr | red | Last 4 digits of account number 22 | 91 | | |
| 2.2 | Wells Fargo | o Dealer | Describe the property that secures the claim: | \$6,793.00 | \$2,016.00 | \$4,777.00 |
| | Creditor's Name | | 2005 Toyota Corolla | | | |
| | | 90 9 80201-1790 ity, State & Zip Code | As of the date you file, the claim is: Check all the apply. Contingent Unliquidated | t | | |
| Who | o owes the debt | ? Check one. | Disputed Nature of lien. Check all that apply. | | | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debt | or 2 only debtors and another | ■ An agreement you made (such as mortgage o car loan) □ Statutory lien (such as tax lien, mechanic's lier □ Judgment lien from a lawsuit | | | |
| | At least one of the Check if this clair community debt | n relates to a | Other (including a right to offset) | | | |
| Date | e debt was incurr | red | Last 4 digits of account number 22 | 23 | | |

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property

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| Debtor 1 | Chad D Pletz | | | Case number (f know) | |
|------------|--|------------------------------|-----------------------------|----------------------|---|
| | First Name | Middle Name | Last Name | • | |
| | | | | | |
| | | | | | |
| Add the do | ollar value of your entrie | es in Column A on this pag | ge. Write that number here: | \$25,914.00 |] |
| | e last page of your form number here: | n, add the dollar value tota | Is from all pages. | \$25,914.00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | Ca | 13C 10-11101 1 | Docur | | 2 of 72 | 7.33 Desc IVI | airi |
|-------------------------------|--|--|--|--|---|---|---|
| Filli | in this inform | nation to identify your | | Hem Faue 37 | | 1 | |
| Dah | tor 1 | Chad D Pletz | | | | 1 | |
| Den | 101 1 | First Name | Middle Name | Last Name | | | |
| | tor 2 | E: AN | ACLE M | | | | |
| (Spot | use if, filing) | First Name | Middle Name | Last Name | | | |
| Unit | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRI | CT OF ILLINOIS, EAST | ERN DIVISION | | |
| Cas | e number | | | | | | |
| (if kno | own) | | | | | ☐ Check i | f this is an |
| | | | | | | amende | ed filing |
| Offi | icial Form | n 106E/F | | | | | |
| | | :/F: Creditors W | ho Have Unse | cured Claims | | | 12/15 |
| ny e Sche D: Cr he C | xecutory cont dule G: Execut editors Who H | racts or unexpired leases tory Contracts and Unexp lave Claims Secured by P age to this page. If you ha | that could result in a cla ired Leases (Official Forr operty. If more space is | im. Also list executory con m 106G). Do not include a needed, copy the Part yo | art 2 for creditors with NONI ontracts on Schedule A/B: P iny creditors with partially so u need, fill it out, number the at Part. On the top of any ad | Property (Official Form secured claims that are se entries in the boxes | 106A/B) and on e listed in Schedule on the left. Attach |
| Part | List Al | II of Your PRIORITY Un | secured Claims | | | | |
| | • | ors have priority unsecure | d claims against you? | | | | |
| | No. Go to P | art 2. | | | | | |
| | Yes. | | | | | | |
| Part | 2: List Al | II of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. | Do any credito | ors have nonpriority unsec | cured claims against you | ? | | | |
| | ☐ No. You hav | ve nothing to report in this p | art. Submit this form to the | court with your other sche | dules. | | |
| | Yes. | | | | | | |
| 1 | unsecured clain | m, list the creditor separately | for each claim. For each | claim listed, identify what ty | holds each claim. If a credito ype of claim it is. Do not list cla three nonpriority unsecured cla | aims already included in | Part 1. If more |
| | | | | | | Total | l claim |
| 4.1 | Baxter (| Credit Union | Last 4 di | gits of account number | 3732 | | \$8,560.05 |
| | Nonpriority | Creditor's Name | When we | as the debt incurred? | | | |
| | 340 N W | lilwaukee Ave | when wa | is the debt incurred? | | | |
| | | Hills, IL 60061 | | | | | |
| | | treet City State ZIp Code | As of the | date you file, the claim i | s: Check all that apply | | |
| | _ | rred the debt? Check one. | | | | | |
| | Debtor | • | ☐ Conti | • | | | |
| | ☐ Debtor | - | ☐ Unliqu | uidated | | | |
| | ☐ Debtor | 1 and Debtor 2 only | ☐ Dispu | | | | |
| | | t one of the debtors and an | J | NONPRIORITY unsecured | i claim: | | |
| | ☐ Check debt | if this claim is for a com | | | | | |
| | | m subject to offset? | | ations arising out of a sepa priority claims | ration agreement or divorce th | nat you did not | |
| | ■ No | - | • | ' ' | g plans, and other similar debt | ts | |
| | ☐ Yes | | ■ Other | Specify | | | |
| | | | — 5016 | | | | |

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Debtor 1 Pletz, Chad D 4.2 Last 4 digits of account number \$741.52 **Best Buy** 5395 Nonpriority Creditor's Name When was the debt incurred? PO Box 5893 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Capital One** Last 4 digits of account number 4597 \$745.44 Nonpriority Creditor's Name When was the debt incurred? PO Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Credit First** Last 4 digits of account number 4652 \$1,016.99 Nonpriority Creditor's Name When was the debt incurred? PO Box 81410 Cleveland, OH 44181-0410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| Debto | Pletz, Chad D | Case number (if know) | |
|-------|--|--|------------|
| 4.5 | First Bankcard Nonpriority Creditor's Name | Last 4 digits of account number 3119 | \$2,524.30 |
| | Nonpholity Orealor 3 Name | When was the debt incurred? | |
| | PO Box 2557 | | |
| | Omaha, NE 68103 | | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.6 | Home Depot | Last 4 digits of account number 3339 | \$2,095.60 |
| | Nonpriority Creditor's Name | | ΨΞ,000.00 |
| | | When was the debt incurred? | |
| | PO Box 6497 | | |
| | Sioux Falls, SD 57117 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the dam is. Oneok an that apply | |
| | ■ Debtor 1 only | Пол | |
| | | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.7 | JC Penney | Last 4 digits of account number 6531 | \$5,450.77 |
| | Nonpriority Creditor's Name | | |
| | PO Box 533 | When was the debt incurred? | |
| | Dallas, TX 75221 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | , | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | | Student loans | |
| | ☐ Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | | |
| | Yes | Other. Specify5361 | |

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Chad D
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Case number (f know)

Debtor 1 Pletz, Chad D 4.8 Last 4 digits of account number \$395.62 **Kohls** 5891 Nonpriority Creditor's Name When was the debt incurred? PO Box 3043 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 Last 4 digits of account number 7721 Lowe's \$8,486.60 Nonpriority Creditor's Name When was the debt incurred? PO Box 2510 Tuscaloosa, AL 35403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.10 Last 4 digits of account number \$958.29 **Quicken Loans** 7716 Nonpriority Creditor's Name When was the debt incurred? 1050 Woodward Ave Detroit, MI 48226-1906 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| DCDIO | rietz, Chau D | | |
|-------|---|--|------------|
| 4.11 | Sears Bankruptcy Recovery Nonpriority Creditor's Name | Last 4 digits of account number 3944 | \$5,044.78 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | PO Box 3671 | | |
| | Des Moines, IA 50322 | _ | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.12 | Target Card Services | Last 4 digits of account number 3812 | \$1,021.59 |
| 2 | Nonpriority Creditor's Name | | ψ1,021.33 |
| | | When was the debt incurred? | |
| | PO Box 660170 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you file, the claim is. Offect all that apply | |
| | ■ Debtor 1 only | Пол | |
| | | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | □ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | Other. Specify | |
| | | — Other. Specify | |
| 4.13 | Walmart | Last 4 digits of account number 9614 | \$5,040.95 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | PO Box 965024 Attn: Bankruptcy | | |
| | Dept | | |
| | Orlando, FL 32896 | _ | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Pletz, Chad D

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 42,082.50 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 42,082.50 |

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| | | DOCUME | ni Page 38 di 77 | |
|------------------------|--------------------------|-------------------|-------------------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Chad D Pletz | | | |
| | First Name | Middle Name | Last Name | _) |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION | _ |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | <u> </u> |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | Docume | nt Page 39 of 7 | 72 | |
|-----------------------------------|--|---|---|--|--|
| Fill in th | is information to identify your | case: | | | |
| Debtor 1 | Chad D Pletz | | | | |
| 20210 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | Middle News | Land Marria | | |
| (Spouse if, | filing) First Name | Middle Name | Last Name | | |
| United S | tates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN D | DIVISION | |
| Case nu | mher | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | ol Form 106H | | | | |
| | al Form 106H | • | | | |
| Sche | dule H: Your Cod | ebtors | | | 12/15 |
| are filing and num case nun | together, both are equally resp | onsible for supplying cor the left. Attach the Addition puestion. | rect information. If more sonal Page to this page. On | space is needed, cop n the top of any Addi | as possible. If two married people py the Additional Page, fill it out, itional Pages, write your name and |
| | | od are ming a joint case, do | Tiot list elitier spouse as a c | odebior. | |
| □ N | | | | | |
| Y | es | | | | |
| | ithin the last 8 years, have you ornia, Idaho, Louisiana, Nevada, | | | | states and territories include Arizona, |
| ■ N | o. Go to line 3. | | | | |
| | es. Did your spouse, former spous | se, or legal equivalent live wi | th you at the time? | | |
| | | | • | | |
| line 1061 | | at person is a guarantor o | or cosigner. Make sure yo | u have listed the cre | with you. List the person shown in editor on Schedule D (Official Form EFF, or Schedule G to fill out |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The crec Check all schedules | litor to whom you owe the debt s that apply: |
| 3.1 | Sonia Pletz 210 Stillwater Dr Hainesville, IL 60030-4129 |) | | ■ Schedule D, lir □ Schedule E/F, □ Schedule G Wells Fargo Dea | line |
| 3.2 | Sonia Pletz 210 Stillwater Dr Hainesville, IL 60030-4129 |) | | ■ Schedule D, lir □ Schedule E/F, □ Schedule G Wells Fargo Dea | line |

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| Fill | in this information to identify your ca | ase: | | | | | | | |
|-------------|---|--------------------------|------------------------------------|------------|-------------------|----------------|--------------|------------------------|------------|
| Del | otor 1 Chad D Plet | Z | | | _ | | | | |
| | otor 2 ouse, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | NORTHERN DISTRIC | CT OF ILLINOIS, EAST | ERN | _ | | | | |
| | se number | | - | | | | d filing | postpetition or | chapter 13 |
| 0 | fficial Form 106I | | | | N | 1M / DD/ Y | YYY | | |
| S | chedule I: Your Inco | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you ause. If you are separated and you ch a separate sheet to this form. Out the Describe Employment | spouse is not filing wit | h you, do not include | informa | tion about y | our spou | se. If more | space is ne | eded, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-fil | ing spouse | |
| | If you have more than one job, attach a separate page with | Employment status* | ■ Employed | | | ■ Emplo | yed | | |
| | information about additional | | ☐ Not employed | | | ☐ Not employed | | | |
| | employers. | Occupation | | | | See Scl | hedule A | ttached | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Baxter Healthcar | e Corp | oration | | | | |
| | Occupation may include student o homemaker, if it applies. | r Employer's address | 1 Baxter Pkwy Deerfield, IL 600 | 15-462 | 5 | | | | |
| Par | t 2: Give Details About Mon | How long employed the | | chment | for Addition | al Employ | ment Info | rmation | |
| Esti | mate monthly income as of the da ss you are separated. | | ou have nothing to repor | rt for any | v line, write \$0 |) in the spa | ace. Include | e your non-filir | ng spouse |
| | u or your non-filing spouse have more ce, attach a separate sheet to this for | | oine the information for a | all emplo | yers for that | person on | the lines be | elow. If you ne | ed more |
| | | | | | For Deb | otor 1 | | otor 2 or ng spouse | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, ca | | | 2. | \$6 | ,807.78 | \$ | 3,126.14 | |
| 3. | Estimate and list monthly overti | me pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add lin | e 2 + line 3. | | 4. | \$ 6,80 | 07.78 | \$3 | 3,126.14 | |

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| Deb | otor 1 | Pletz, Chad D | _ | Cas | e number (<i>if knov</i> | vn) | | | |
|-----|--------------------------|--|------------|------------|---------------------------|--------------|---------------|----------|----------|
| | | | | | or Debtor 1 | | For Debto | | |
| | Copy | y line 4 here | 4. | \$_ | 6,807.7 | <u>78</u> | \$3 | 3,126.14 | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,297. | 19 | \$ | 702.09 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.0 | | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 407.3 | 38 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | · · · | 482. | | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$_ | 725.2 | _ | \$ | 0.00 | |
| | 5f. 5g. | Domestic support obligations Union dues | 5f. | \$ \$ | 0.0 | | \$ | 0.00 | |
| | 5g. 5h. | Other deductions. Specify: Vol Benefits | 5g. 5h. | · - | 0.0 22.3 | | · | 0.00 | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ \$ | | | \$ | | |
| | | | | · - | 2,934.2 | | · | 702.09 | |
| 7. | | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ _ | 3,873.5 | 0 | \$2 | 2,424.05 | |
| 8. | List a 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.0 | | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.0 | <u> 00</u> | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.0 | 20 | \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | | 0.0 | | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$ | 0.0 | | \$ | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.4 | | \$ | | |
| | 8g. | Pension or retirement income | — 8g. | Ψ. \$ | 0.0 | | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h. | ٠. | | 00 | · | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0.0 | \equiv | \$ | 0.00 | |
| 10 | Calc | ulate monthly income. Add line 7 + line 9. | 10. | • | 3,873.50 + | \$ | 2 424 05 | 5 = \$ | 6 207 EE |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | ' — | 3,073.30 | Ψ - | 2,424.05 | <u>'</u> | 6,297.55 |
| 11. | State Inclu- other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your de friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not average. | epende | | | | | . +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | \$Combin | 6,297.55 |
| 13. | Do y ■ | ou expect an increase or decrease within the year after you file this form' | ? | | | | | monthly | |
| | | Yes. Explain: | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Debtor 1 | Pletz, Chad D | Case number (if known) |
|----------|---------------|------------------------|
| Deploi | Pietz, Chad D | Case Humber (# known) |

Official Form B 6I Attachment for Additional Employment Information

| Spouse | <u> </u> | |
|---------------------|---|--|
| Occupation | | |
| Name of Employer | FedEx Ground Pkg System | |
| How long employed | | |
| Address of Employer | 1790 Kirby Pkwy Ste 300 Memphis, TN 38138-7411 | |
| Spouse | | |
| Occupation | | |
| Name of Employer | Ricoh USA | |
| How long employed | | |
| Address of Employer | 3920 Arkwright Rd Ste 400 Macon. GA 31210-1748 | |

Official Form 106I Schedule I: Your Income page 3

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| Fill | in this informat | tion to identify you | ır case: | | | | |
|----------------------|--|---|--|--|-------------|--|--|
| Deb | | Chad D Pletz | | | | ck if this is: | |
| Deb | tor 2 ouse, if filing) | | | | | An amended filing A supplement show expenses as of the | ving postpetition chapter 13 following date: |
| Unite | ed States Bankr | uptcy Court for the: | NORTHERN DISTRICT OF ILLIN EASTERN DIVISION | OIS, | | MM / DD / YYYY | |
| 1 | e number nown) | | | | | | |
| | | rm 106J | | | | | |
| | | J: Your E | EXPENSES OSSIBLE If two married people are | filing together, both | h aro oqual | ly responsible for | 12/1: |
| info (if k Par | ormation. If monomore in the contract of the c | ore space is need er every question ibe Your Househ | ded, attach another sheet to this for a second and the second and the second areas are second as the second are second as the second areas are second areas are second as the second areas are second areas are second as the second areas are second areas are second areas are second | | | | |
| 1. | Is this a join | | | | | | |
| | ■ No. Go to □ Yes. Doe s | | a separate household? | | | | |
| | □ N | - | file Official Form 106J-2, Expenses | for Separate Househ | oldof Debto | or 2. | |
| 2. | Do you have | e dependents? | □ No | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ■ Yes. Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | Daughter | | 13 | □ No ■ Yes |
| | | | | Son | | 23 | □ No ■ Yes |
| | | | | | | | □ No □ Yes |
| | | | | | | | □ No |
| 3. | expenses of | enses include people other tha your dependen | | | | _ | ☐ Yes |
| exp | imate your ex | penses as of you | g Monthly Expenses ur bankruptcy filing date unless yo nkruptcy is filed. If this is a suppl | | | | |
| valu | | sistance and hav | en-cash government assistance if e included it on Schedule I: Your I | | | Your exp | enses |
| 4. | | r home ownershid any rent for the o | ip expenses for your residence. In ground or lot. | clude first mortgage | 4. 3 | \$ | 1,733.00 |
| | If not includ | ed in line 4: | | | | | |
| | 4a. Real e | state taxes | | | 4a. | \$ | 0.00 |
| | 4b. Proper | rty, homeowner's, | or renter's insurance | | 4b. | · | 0.00 |
| | | | air, and upkeep expenses | | 4c. | · | 0.00 |
| 5. | | | n or condominium dues nts for your residence, such as hon | ne equity loans | 4d. 5. | · | 0.00 |

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| Debto | or 1 | Pletz, Ch | ad D | Case | num | ber (if known) | |
|--------------|---------------|---------------|---|---------------------------------------|--------------|--------------------------|------------------------------|
| 6. l | Jtiliti | ies: | | | | | |
| 6 | Sa. | Electricity, | heat, natural gas | | 6a. | \$ | 250.00 |
| 6 | Sb. | Water, sev | ver, garbage collection | | 6b. | \$ | 75.00 |
| 6 | Sc. | Telephone | , cell phone, Internet, satellite, and cable ser | vices | 6c. | \$ | 500.50 |
| 6 | 3d. | Other. Spe | cify: | | 6d. | \$ | 0.00 |
| 7. F | Food | and house | keeping supplies | | 7. | \$ | 975.00 |
| 8. (| Child | care and c | hildren's education costs | | 8. | \$ | 0.00 |
| 9. (| Cloth | ning, laundr | y, and dry cleaning | | 9. | \$ | 250.00 |
| 10. F | Perso | onal care p | roducts and services | | 10. | \$ | 90.00 |
| | | • | ital expenses | | 11. | \$ | 360.00 |
| 12. 1 | Frans | sportation. | Include gas, maintenance, bus or train fare. | | | · | |
| | | | ar payments. | | 12. | \$ | 450.00 |
| 13. E | Enter | rtainment, d | clubs, recreation, newspapers, magazines | and books | 13. | \$ | 200.00 |
| 14. (| Chari | itable contr | ibutions and religious donations | | 14. | \$ | 50.00 |
| 15. I | nsur | ance. | | | | | |
| | | | surance deducted from your pay or included | | | | |
| | | Life insura | | | 15a. | | 71.78 |
| 1 | 15b. | Health insu | urance | • | 15b. | \$ | 0.00 |
| 1 | 15c. | Vehicle ins | urance | | 15c. | \$ | 243.00 |
| 1 | 15d. | Other insu | rance. Specify: | | 15d. | \$ | 0.00 |
| 16. 1 | Гахе | s. Do not inc | clude taxes deducted from your pay or include | d in lines 4 or 20. | | | |
| | Speci | | | | 16. | \$ | 0.00 |
| | | | ase payments: | | 47- | • | 222.22 |
| | | . , | nts for Vehicle 1 | | 17a. | · | 306.90 |
| | | . , | nts for Vehicle 2 | | 17b. | · | 138.57 |
| | | Other. Spe | | | 17c. | \$ | 0.00 |
| | | Other. Spe | | | 17d. | \$ | 0.00 |
| | | | of alimony, maintenance, and support tha | | 18. | \$ | 100.00 |
| | | | our pay on line 5, Schedule I, Your Incom you make to support others who do not I | | 10. | \$ | 0.00 |
| | Speci | | you make to support others who do not i | ve with you. | 19. | Ψ | 0.00 |
| | • | , <u> </u> | erty expenses not included in lines 4 or 5 of | of this form or on Schedule I | | r Income | |
| | 20a. | | on other property | | 20a. | | 0.00 |
| | | Real estate | | | 20b. | | 0.00 |
| | 20c. | | omeowner's, or renter's insurance | | 20c. | | 0.00 |
| | | | ce, repair, and upkeep expenses | | 20d. | · | 0.00 |
| | | | er's association or condominium dues | | 20a. 20e. | | 0.00 |
| | | r: Specify: | | • | 21. | · | |
| ۷۱. د | Jule | i. Opecity. | Spouse's credit cards | | ۷۱. | -Ψ | 300.00 |
| | | | nonthly expenses | | | | |
| 2 | 22a. <i>i</i> | Add lines 4 | through 21. | | | \$ | 6,093.75 |
| 2 | 22b. (| Copy line 22 | 2 (monthly expenses for Debtor 2), if any, fro | m Official Form 106J-2 | | \$ | |
| 2 | 22c. <i>i</i> | Add line 22a | and 22b. The result is your monthly expense | s. | | \$ | 6,093.75 |
| <u> </u> | 2010. | | nanthly not income | | | - | |
| | | • | nonthly net income. | adula I | 220 | ¢. | C 007 FF |
| | 23a. | | 12 (your combined monthly income) from Sch | | 23a. | | 6,297.55 |
| 4 | 23D. | Copy your | monthly expenses from line 22c above. | • | 23b. | -\$ | 6,093.75 |
| 2 | 23c. | Subtract vo | our monthly expenses from your monthly incor | ne. | | | |
| - | | | is your <i>monthly net income</i> . | | 23c. | \$ | 203.80 |
| 04 - | | | | ulabin abounds of the constitution of | h!c • | | |
| ∠4. [| JO YO | ou expect a | In increase or decrease in your expenses u expect to finish paying for your car loan within th | within the year after you file t | nis t | Orm? ayment to increa | ise or decrease because of a |
| | | | terms of your mortgage? | s year or do you expect your mong | aye p | ayment to morea | asc of decrease because of a |
| _ | ■ No | | - y - | | | | |
| | □ Ye | | Evoluin horo: | | | | |
| L | I Ye | 25 | Explain here: | | | | |

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| Fill in this inform | nation to identify your o | case: | | | | |
|---------------------------------------|---|---------------------------|----------------------------|-------------------------|---|-------|
| Debtor 1 | Chad D Pletz | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN | DIVISION | | |
| Case number | | | | | ☐ Check if this is ar amended filing | า |
| Official Form | | | | | | |
| Declarat | ion About a | ın Individual | Debtor's Sc | hedules | | 12/15 |
| obtaining money years, or both. 18 | | connection with a bankr | | | ent, concealing property, coor imprisonment for up to | |
| Did you pay | or agree to pay some | one who is NOT an attorn | ey to help you fill out ba | nkruptcy forms? | | |
| ■ No | | | | | | |
| ☐ Yes. N | lame of person | | | | ruptcy Petition Preparer's No and Signature (Official Form | |
| | ty of perjury, I declare t true and correct. | that I have read the sumn | nary and schedules filed | with this declaration a | and | |
| X /s/ Cha Chad D Signature | | | X Signature of I | Debtor 2 | | |

Date ____

Date March 31, 2016

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| | | Docume | ent Page 46 of 7 | 72 | |
|----------------------|------------------------|-------------------|------------------------|----------|--------------------------------------|
| Fill in this informa | tion to identify your | case: | | | |
| Debtor 1 | Chad D Pletz | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ | |
| United States Bank | cruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN D | DIVISION | |
| Case number | | | | | ☐ Check if this is an amended filing |
| | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | t1: Summarize Your Assets | | |
|-----|---|----------|---------------------------------|
| | | | ır assets ue of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$_ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$_ | 50,311.86 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$_ | 50,311.86 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | ur liabilities ount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$_ | 25,914.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | \$_ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F | \$_ | 42,082.50 |
| | Your total liabilities | \$ | 67,996.50 |
| Par | t3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$_ | 6,297.55 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$_ | 6,093.75 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | her sch | edules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | ersonal, | family, or household |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Debtor 1 Pletz, Chad D Document Page 47 of 72 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____9,366.94

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Bort 4 on Colombia E/E against a fall and an | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | | mation to identify your | case: | | | | | | |
|-------------------|--------------------|---|--|---|--|---|--|--|--|
| De | btor 1 | Chad D Pletz First Name | Middle Name | Last Name | | | | | |
| De | btor 2 | . not reamo | madic Hamb | Lastriamo | | | | | |
| (Spo | ouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| Un | ited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIV | ISION | | | | |
| | se number nown) | | | | - | Check if this is an | | | |
| St Be a | atemen | and accurate as possil | ole. If two married people ar | | qually responsible for supply | | | | |
| | | nore space is needed, wer every question. | attach a separate sheet to t | his form. On the top of any | additional pages, write your | name and case number | | | |
| Pa | rt 1: Give | Details About Your Ma | rital Status and Where You | Lived Before | | | | | |
| 1. | What is you | ır current marital statu | s? | | | | | | |
| | ■ Marrie | | | | | | | | |
| 2. | During the | last 3 years, have you | lived anywhere other than v | where you live now? | | | | | |
| | ■ No □ Yes. Li | _ ` | | | | | | | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 there | lived Debtor 2 Prior Ac | dress: | Dates Debtor 2 lived there | | | |
| 3. stat | | | | | ty property state or territory? | | | | |
| | ■ No □ Yes. M | ake sure you fill out <i>Sch</i> e | edule H: Your Codebtors (Offi | icial Form 106H). | | | | | |
| Pa | rt 2 Expla | in the Sources of You | r Income | | | | | | |
| 4. | Fill in the to | al amount of income yo | u received from all jobs and a | g a business during this yeall businesses, including partogether, list it only once under | | lar years? | | | |
| | □ No | | | | | | | | |
| | Yes. F | ill in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | | of current year until ed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$12,550.00 | ☐ Wages, commissions, bonuses, tips | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |

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Case number (if known) Document Debtor 1 Pletz, Chad D

| | | | | Debtor 1 | | | Debtor 2 | | |
|----|---|---|---|---|---|---|--|---------------|---|
| | | | | Sources of income Check all that apply. | | s income e deductions and ions) | Sources of inco | | Gross income (before deductions and exclusions) |
| | r last calen inuary 1 to | | 31, 2015) | ■ Wages, commissions, bonuses, tips | | \$61,945.00 | ☐ Wages, comr bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | Operating a b | ousiness | |
| | r the calend inuary 1 to | | | ■ Wages, commissions, bonuses, tips | | \$60,000.00 | ☐ Wages, commonuses, tips | missions, | |
| | | | | Operating a business | | | Operating a b | ousiness | |
| 5. | Include incother publication you are filing List each s | ome regard c benefit pa ng a joint ca | less of whether yments; pensionse and you had ne gross income | e during this year or the two er that income is taxable. Exart ons; rental income; interest; of two income that you received to me from each source separat | mples of <i>ot</i> dividends; r together, lis | her income are alim noney collected fron t it only once under | n lawsuits; royalties; Debtor 1. | | |
| | | | | Debtor 1 Sources of income Describe below | | s income e deductions and ions) | Debtor 2 Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) |
| | r last calen nuary 1 to | | 31, 2015) | IRA distribution | | \$6,389.00 | | | |
| | | | | Dividends | | \$64.00 | | | |
| | r the calend inuary 1 to | | | IRA distribution | | \$15,000.00 | | | |
| Pa | rt 3: List | Cortain Da | ymonts Vou | Made Before You Filed for | Bankrunt | | | | |
| 6. | | Debtor 1's Neither De | or Debtor 2' | s debts primarily consume lebtor 2 has primarily cons personal, family, or household | r debts? umer debt | s. Consumer debts | are defined in 11 U. | S.C. § 101(8 | 3) as "incurred by an |
| | | During the | 90 days befo | re you filed for bankruptcy, di | d you pay a | ny creditor a total of | \$6,225* or more? | | |
| | | □ No. | Go to line 7 | 7. | | | | | |
| | | □ Yes | creditor. Do | each creditor to whom you pai o not include payments for do o an attorney for this bankrup on 4/01/16 and every 3 years | omestic sup tcy case. | oport obligations, su | uch as child support | and alimon | |
| | ■ Yes. | Debtor 1 | or Debtor 2 o | r both have primarily cons re you filed for bankruptcy, die | umer debt | s. | • | | |
| | | ■ NI= | Co to Bee | , | | | | | |
| | | ■ No. □ Yes | Go to line 7 | '. each creditor to whom you pai | id a tatal of | \$600 or mara and 4 | no total amount ver- | anid that are | ditor. Do not include |
| | | — res | | or domestic support obligation | | | | | |
| | Creditor' | s Name and | d Address | Dates of paym | nent | Total amount paid | Amount you still owe | Was this p | payment for |

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Debtor 1 Pletz, Chad D Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider Reason for this payment Insider's Name and Address Dates of payment Total amount Amount you Include creditor's name paid still owe Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Status of the case Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No Yes. Fill in the information below. Creditor Name and Address Value of the Describe the Property Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave Value person the gifts

Address:

Person to Whom You Gave the Gift and

Case 16-11187 Doc 1 Filed 03/31/16 Entered 03/31/16 16:10:55 Page 51 of 72 Case number (if known) Document Debtor 1 Pletz, Chad D 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity ☐ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) monthly \$50.00 Various Charities Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for hankruntcy, did you or anyone else acting on your behalf hay or transfer any property to

| 10. | consulted about seeking bankruptcy or preparing | ng a bankruptcy petition? , or credit counseling agencies for services required in | | , anyone you |
|-----|---|--|-----------------------------------|--------------------|
| | □ No■ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount o paymen |
| | Paul R. Idlas 1099 N Coporate Corcle Grayslake, IL 60030 Sonia Pletz | | 3/31/16 | \$1,200.0 |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

| ■ No □ Yes. Fill in the details. | | | |
|----------------------------------|---|------------------------------|--|
| Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | |

Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Amount of

made

payment

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| | Person Who Received Transfer Address | Description and v property transferr | | paym | ibe any property or ents received or debts n exchange | Date transfer was made |
|----------------|---|--|-------------------------|--------------|---|---|
| | Person's relationship to you | | | | - | |
| | Gurnee Dodge | | | Cour | Chrysler Town & htry Van ed in for 2 current cles | |
| | Unknown | | | Pfize | r Stock \$1813 | 2015 |
| | Unknown | | | Abby | rie Stock \$1550 | 2015 |
| 19. | Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details. | | / property to a | self-settled | trust or similar device o | f which you are a |
| | Name of trust | Description and v | alue of the pro | perty trans | ferred | Date Transfer was made |
| Par 20. | t 8: List of Certain Financial Accounts, Instru- Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associate No Yes. Fill in the details. | were any financial acc | ounts or instru | iments held | | |
| | | Last 4 digits of account number | Type of acco instrument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? No Yes. Fill in the details. | ar before you filed for l | bankruptcy, an | y safe depo | osit box or other deposit | ory for securities, |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, St and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or p No | place other than your l | home within 1 y | year before | you filed for bankruptcy | , |
| | ☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S | | Describe | the contents | Do you still have it? |
| | | and ZIP Code) | ,,, | | | |

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for

Case 16-11187 Doc 1 Filed 03/31/16 Entered 03/31/16 16:10:55 Page 53 of 72 Case number (if known) Document Debtor 1 Pletz, Chad D someone. Nο Yes. Fill in the details. Describe the property Value Owner's Name Where is the property? (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No ☐ Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number case Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

A member of a limited liability company (LLC) or limited liability partnership (LLP)

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. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

| EIII in th | :- : | | | | | | |
|---|---|---|---------------------------------|---|--------------------|--|-----------------------------------|
| FIII IN TN | is information to identify your case: | | Check or 122A-1S | | irected | in this form and i | n Form |
| Debtor 1 | Chad D Pletz | | 122A-13 | ирр. | | | |
| Debtor 2 |) | | | here is no pres | umption | o of abuse | |
| (Spouse, it | | | | · | | | |
| | Northern Distric | et of Illinois, Eastern | | | | mine if a presum | |
| United S | States Bankruptcy Court for the: Division | | | applies will be n <i>Calculation</i> (Offi | | nder <i>Chapter 7 Me</i> | ans Test |
| Cooo ni | umb or | | _ | , | | , | |
| Case nu (if known) | | | | The Means Test military service b | | ot apply now beca | use of qualified |
| | | | | | | 11.7 | |
| o | 1004 | | ⊔ Cr | eck if this is a | ın ame | ended filing | |
| Offici | ial Form 122A - 1 | | | | | | |
| Char | oter 7 Statement of Your Cu | urrent Monthly | Incom | е | | | 12/15 |
| a separat number (i military s Part 1: | mplete and accurate as possible. If two married people sheet to this form. Include the line number to which if known). If you believe that you are exempted from a ervice, complete and file Statement of Exemption fro Calculate Your Current Monthly Income that is your marital and filing status? Check one | n the additional information a a presumption of abuse beca m Presumption of Abuse Und | pplies. On the use you do no | top of any addit t have primarily | ional pa consum | ges, write your na er debts or becau | nme and case use of qualifying |
| | Not married. Fill out Column A, lines 2-11. | • | | | | | |
| | Married and your spouse is filing with you. Fill | out both Columns A and B, | lines 2-11. | | | | |
| | Married and your spouse is NOT filing with you | · | | | | | |
| | Living in the same household and are not le | gally separated. Fill out bo | th Columns A | A and B, lines 2- | 11. | | |
| | Living separately or are legally separated. F penalty of perjury that you and your spouse are apart for reasons that do not include evading the | legally separated under nonl | oankruptcy la | w that applies or | | | |
| 101(1) 6 mon | the average monthly income that you received from 0A). For example, if you are filing on September 15, the 6 ths, add the income for all 6 months and divide the total line same rental property, put the income from that property. | 6-month period would be March by 6. Fill in the result. Do not in | 1 through Aug clude any inco | just 31. If the amo | unt of yo | our monthly income e. For example, if b | varied during the |
| | | | Colui Debt | | Debt | mn B or 2 or filing spouse | |
| 2 V 0 | our gross wages, salary, tips, bonuses, overtime | and commissions (hefor | الد م | | 11011- | ming spouse | |
| | yroll deductions). | e, and commissions (Deror | \$ | 6,284.10 | \$ | 3,082.84 | |
| | imony and maintenance payments. Do not include solumn B is filled in. | de payments from a spouse | if \$ | 0.00 | \$ | 0.00 | |
| of fro roc | amounts from any source which are regularly you or your dependents, including child suppo m an unmarried partner, members of your househol ommates. Include regular contributions from a spot on tinclude payments you listed on line 3 | rt. Include regular contribut | ions | 0.00 | \$ | 0.00 | |
| | t income from operating a business, profession | n. or farm | | | | | |
| | , 3 | Debtor 1 | | | | | |
| Gr | oss receipts (before all deductions) | \$ 0.00 | | | | | |
| | dinary and necessary operating expenses | -\$ 0.00 | | | | | |
| | et monthly income from a business, profession, or f | farm \$ 0.00 Copy h | nere -> \$ | 0.00 | \$ | 0.00 | |
| | t income from rental and other real property | · | | | | | |
| | | Debtor 1 | | | | | |
| Gr | oss receipts (before all deductions) | \$ 0.00 | | | | | |
| | dinary and necessary operating expenses | -\$ 0.00 | | | | | |
| | et monthly income from rental or other real property | , \$ 0.00 Copy h | nere -> \$ | 0.00 | \$ | 0.00 | |
| | | | | | | | |

Official Form 122A-1

0.00

0.00

7. Interest, dividends, and royalties

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Debtor 1 Pletz, Chad D Case number (if known)

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | | , |
|------|--|--|-------------|-------------------|-------------|-----------------------------------|--------------|--------------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | 0.00 | 1 |
| | Do not enter the amount if you contend that the amount r Social Security Act. Instead, list it here: | eceived was a benefit u | nder the | | | | | |
| | For you \$ | 0. | 00 | | | | | |
| | For your spouse | | 00 | | | | | |
| 9. | Pension or retirement income. Do not include any amount of the Social Security Act. | ount received that was a | a benefit | \$ | 0.00 | \$ | 0.00 | · |
| 10. | Income from all other sources not listed above. Spe not include any benefits received under the Social Secur a victim of a war crime, a crime against humanity, or inte If necessary, list other sources on a separate page and p | ity Act or payments rece rnational or domestic te | eived as | | | | | |
| | · | | | \$ | 0.00 | \$ | 0.00 | |
| | | | | \$ | 0.00 | \$ | 0.00 | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | 0.00 | |
| 11. | Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the to | | \$6 | 5,284.10 | + \$ | 3,082.84 | | 9,366.94 |
| Part | Determine Whether the Means Test Applies to | o You | | | | | | |
| 12. | Calculate your current monthly income for the year. | Follow these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line | 11 | | Copy | line 11 h | ere=> | \$ | 9,366.94 |
| | | | | | | | - | 5,555.5 |
| | Multiply by 12 (the number of months in a year) | | | | | | x 1 | 2 |
| | 12b. The result is your annual income for this part of the | form | | | | 12b. | \$ <u>11</u> | 2,403.28 |
| 13. | Calculate the median family income that applies to y | ou. Follow these steps | :: | | | | | |
| | Fill in the state in which you live. | IL | | | | | | |
| | Fill in the number of people in your household. | 4 | | | | | | |
| | Fill in the median family income for your state and size To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of | online using the link sp | pecified in | the separate | instruction | 13. ons for this | \$8 | 6,818.00 |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. C Go to Part 3. | n the top of page 1, ch | eck box 1 | T,here is no p | resumptic | n of abuse. | | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 21, | The presu | mption of abu | use is dete | ermined by Fo | rm 122A-2 | 2. |
| Part | 3: Sign Below | | | | | | | |
| | By signing here, I declare under penalty of perjury to | hat the information on th | nis statem | ent and in an | y attachm | ents is true an | d correct. | |
| | X /s/ Chad D Pletz | | | | | | | |
| | Chad D Pletz Signature of Debtor 1 | | | | | | | |
| | Date March 31, 2016 | | | | | | | |
| | MM / DD / YYYY If you checked line 14a, do NOT fill out or file Forr | n 122A-2 | | | | | | |
| | • | | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and f | iie ii willi liiis ioiiii. | | | | | | |

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| Fill in this information to identify you | ır case: | Check the appropriate box as direct |
|--|---|---|
| Debtor 1 Chad D Pletz | | lines 40 or 42: |
| Debtor 2 (Spouse, if filing) | | According to the calculations required Statement: |
| United States Bankruptcy Court for the: | Northern District of Illinois, Eastern Division | ■ 1. There is no presumption of abus |
| Case number(if known) | _ | ☐ 2. There is a presumption of abuse |
| | | ☐ Check if this is an amended filing |

| Check the appropriate box as directed in lines 40 or 42: |
|---|
| According to the calculations required by this Statement: |
| ■ 1. There is no presumption of abuse. |
| 2. There is a presumption of abuse. |
| |

Official Form 122A - 2

Chapter 7 Means Test Calculation

12/15

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

| Par | 1: Determine Your Adjusted Income | | | | | |
|-----|--|-------------------|--|----------------|---------------|-------------------|
| 1. | Copy your total current monthly income. | Copy line 11 from | Official Form 122A | 1 here=> | \$ | 9,366.94 |
| 2. | Did you fill out Column B in Part 1 of Form 122A-1? ☐ No. Fill in \$0 for the total on line 3. | | | | | |
| | ■ Yes. Is your spouse Filing with you? | | | | | |
| | ■ No. Go to line 3. | | | | | |
| | ☐ Yes. Fill in \$0 the total on line 3. | | | | | |
| 3. | Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow to On line 11, Column B of Form 122A-1, was any amount of the you or your dependents? | hese steps: | | | for the house | ehold expenses of |
| | ☐ No. Fill in 0 for the total on line 3.☐ Yes. Fill in the information below: | | | | | |
| | State each purpose for which the income was used. For example, the income is used to pay your spouse's t support other than you or your dependents. | | Fill in the amount are subtracting fro your spouse's inc | om | | |
| | Paycheck deductions | \$ | 693.57 | | | |
| | | \$ \$ | | | | |
| | Total | \$ | 693.57 | Copy total her | e=> \$ | 693.57 |
| 4. | Adjust your current monthly income. Subtract line 3 from | line 1. | | | \$ | 8,673.37 |

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Debtor 1 Pletz, Chad D Case number (if known)

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4 Living 1 Housing

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,513.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ 60
- 7b. Number of people who are under 65 X
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 240.00 Copy here=> \$ 240.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 144
- 7e. Number of people who are 65 or older X ______0
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00
- 7g. Total. Add line 7c and line 7f \$ 240.00 Copy total here=> \$ 240.00

Case 16-11187 Doc 1 Filed 03/31/16 Entered 03/31/16 16:10:55 Desc Main Document Page 59 of 72 Pletz, Chad D Debtor 1 Case number (if known) **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in 656.00 the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,205.00 listed for your county for mortgage or rent expenses..... 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment -NONE-Repeat this Copy amount on 0.00 0.00 Total average monthly payment here=> line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly paymen) from line 9a (mortgage or Copy 2.205.00 2.205.00 here=> rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

☐ 0. Go to line 14.

☐ 1. Go to line 12.

2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

524.00

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|---------------|-------|----------|------------------------|-----------|
| | | Document | 1 age 00 01 12 | |
| Pletz, Chad D | | | Case number (if known) | |

| 13. | may ı | cle ownership or lease expense: Using the IRS Local S not claim the expense if you do not make any loan or lease ehicles. | | | | | | |
|------|---------|--|-----------------|-------------|--------------------------|---------------------------|--|--------|
| Vel | nicle 1 | Describe Vehicle 1: | | | | | | |
| 13a. | Own | ership or leasing costs using IRS Local Standard | | | \$ | 517.00 | | |
| 13b. | | age monthly payment for all debts secured by Vehicle 1. | | | | | | |
| | | ot include costs for leased vehicles. | | | | | | |
| | contr | alculate the average monthly payment here and on line a actually due to each secured creditor in the 60 months aft divide by 60. | | | | | | |
| | | Name of each creditor for Vehicle 1 | Average payment | | | | | |
| | | Wells Fargo Dealer Services | _ \$ | 306.90 | | | | |
| | | Total Average Monthly Payment | \$ | 306.90 | Copy here => | -\$306 | Repeat this amount on line 33b. | |
| 13c. | | ehicle 1 ownership or lease expense ract line 13b from line 13a. if this amount is less than \$0 | , enter \$0 | | \$ | 210.10 | Copy net Vehicle 1 expense here => \$ | 210.10 |
| Vel | nicle 2 | 2 Describe Vehicle 2: | | | | | | |
| 13d. | Own | ership or leasing costs using IRS Local Standard | | | \$ | 517.00 | | |
| 13e. | | age monthly payment for all debts secured by Vehicle 2. D | o not include | e costs for | | | | |
| | | Name of each creditor for Vehicle 2 | Average payment | monthly | | | | |
| | | Wells Fargo Dealer Services | _ \$ | 129.33 | | | | |
| | | Total Average Monthly Payment | \$ | 129.33 | Copy here => -\$ _ | 129.3 | Repeat this amount on line 33c. | |
| 13f. | | /ehicle 2 ownership or lease expense ract line 13e from line 13d. if this amount is less than \$0 | , enter \$0 | | \$ | 387.67 | Copy net Vehicle 2 expense here => \$ | 387.67 |
| 14. | | ic transportation expense: If you claimed 0 vehicles in sportation expense allowance regardless of whether you u | | | ocal Standar | ds, fill in th <i>eut</i> | olic \$ | 0.00 |
| 15. | dedu | tional public transportation expense: If you claimed 1 ct a public transportation expense, you may fill in what you than the IRS Local Standard for Public Transportation. | | | | | | 0.00 |

Debtor 1

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Debtor 1 Pletz, Chad D Case number (if known)

| Oth | • | In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. | | |
|-----|---|--|-------------|----------|
| 16. | self-employment taxes, Social your pay for these taxes. How | nount that you will actually owe for federal, state and local taxes, such as income taxes, al Security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 and e total monthly amount that is withheld to pay for taxes. | | |
| | Do not include real estate, sa | ales, or use taxes. | \$ <u> </u> | 1,197.40 |
| 17. | Involuntary deductions: The union dues, and uniform cost | he total monthly payroll deductions that your job requires, such as retirement contributions, sts. | | |
| | Do not include amounts that | are not required by your job, such as voluntary 401(k) contributions or payroll savings. | \$ | 445.10 |
| 18. | together, include payments the | onthly premiums that you pay for your own term life insurance. If two married people are filing hat you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term. | \$ | 71.78 |
| 19. | Court-ordered payments: agency, such as spousal or o | The total monthly amount that you pay as required by the order of a court or administrative child support payments. | | |
| | Do not include payments on | past due obligations for spousal or child support. You will list these obligations in line 35. | \$ | 100.00 |
| 20. | Education: The total month! as a condition for your job | y amount that you pay for education that is either required: | | |
| | for your physically or men | stally challenged dependent child if no public education is available for similar services. | \$ | 0.00 |
| 21. | Childcare: The total monthly | y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. | | |
| | Do not include payments for | any elementary or secondary school education. | \$ | 0.00 |
| 22. | required for the health and w | enses, excluding insurance costs: The monthly amount that you pay for health care that is elfare of you or your dependents and that is not reimbursed by insurance or paid by a health ly the amount that is more than the total entered in line 7. | | |
| | Payments for health insurance | ce or health savings accounts should be listed only in line 25. | \$ | 150.00 |
| 23. | you and your dependents, su | lephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone ary for your health and welfare or that of your dependents or for the production of income, if it aployer. | | |
| | | r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted. | +\$ | 0.00 |
| 24. | Add all of the expenses all Add lines 6 through 23. | lowed under the IRS expense allowances. | \$ | 7,700.05 |

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Debtor 1 Pletz, Chad D Case number (if known)

| Add | itional | Expense Deductions These are additional de | ductions | allowed by the I | Means Test. | | |
|-----|--|--|--------------------------|-------------------------------------|--|-----|--------|
| | Note: Do not include any expense allowances listed in lines 6-24. | | | | | | |
| 25. | 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. | | | | | | |
| | Health | n insurance | \$ | 669.41 | | | |
| | Disab | ility insurance | \$ | 0.00 | | | |
| | Health | n savings account | + \$ | 0.00 | | | |
| | | | | | | | |
| | Total | | \$ | 669.41 | Copy total here=> | \$ | 669.41 |
| | Do yo | ou actually spend this total amount? | | | • | | |
| | | No. How much do you actually spend? | | | | | |
| | | Yes | \$ | | | | |
| 26. | contin house | nued contributions to the care of household or the to pay for the reasonable and necessary care an shold or member of your immediate family who is una butions to an account of a qualified ABLE program. | d support able to pay | of an elderly, c y for such expe | hronically ill, or disabled member of your | \$ | 0.00 |
| 27. | | ction against family violence. The reasonably nearly your family under the Family Violence Prevention | | | | | |
| | By law | v, the court must keep the nature of these expenses | confident | tial. | | \$ | 0.00 |
| 28. | Addit | ional home energy costs. Your home energy cost ance on line 8. | | | n-mortgage housing and utilities | | |
| | - | believe that you have home energy costs that are m ill in the excess amount of home energy costs. | ore than t | he home energ | y costs included in expenses on line 8, | | |
| | | nust give your case trustee documentation of your acted is reasonable and necessary. | tual expe | nses, and you r | must show that the additional amount | \$ | 0.00 |
| 29. | \$156. | ation expenses for dependent children who are 25* per child) that you pay for your dependent childr intary or secondary school. | | | | | |
| | | nust give your case trustee documentation of your ac nable and necessary and not already accounted for | | • | must explain why the amount claimed is | | |
| | * Subj | ject to adjustment on 4/01/16, and every 3 years after | er that for | cases begun o | n or after the date of adjustment. | \$ | 0.00 |
| 30. | than t | ional food and clothing expense. The monthly an he combined food and clothing allowances in the I od and clothing allowances in the IRS National Sta | RS Nation | | | | |
| | | d a chart showing the maximum additional allowand frm. This chart may also be available at the bankrup | | • | s specified in the separate instructions for | | |
| | You m | nust show that the additional amount claimed is reas | onable an | nd necessary. | | \$ | 0.00 |
| 31. | | nuing charitable contributions. The amount that ments to a religious or charitable organization. 26 U. | | | ibute in the form of cash or financial | +\$ | 50.00 |
| 32. | | all of the additional expense deductions nes 25 through 31. | | | | \$ | 719.41 |

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Pletz, Chad D

Case number (if known)

| Dedu | ctions for Debt Payment | | | | | | | | | |
|------|--|------------------|--|----------|----------|--------------------------------------|--------|---------------------|-----------------------|------|
| ar | nd other secured debt, fill in lines | 33a th | in property that you own, including horough 33e. nt, add all amounts that are contractually of | | | | | | | |
| | e 60 months after you file for bankri | | | aue io | eacii se | cured creditor i | | | | |
| | Mortgages on your home: | | | | | | | | erage monthl yment | у |
| 33a. | Copy line 9b here | | | | | | => | \$_ | 0 | .00 |
| | Loans on your first two vehicle | s | | | | | | | | |
| 33b. | Copy line 13b here | | | | | | => | \$_ | 306 | .90 |
| 33c. | Copy line 13e here | | | | | | .=> | \$_ | 129 | .33 |
| 33d. | List other secured debts: | | | | | | | | | |
| Name | of each creditor for other secured de | bt | Identify property that secures the debt | | | Does paymer include taxes insurance? | | | | |
| | | | | | | □ No | | | | |
| | -NONE- | | | | | ☐ Yes | | \$ | | |
| - | | | | | | | | Ψ- | | |
| | | | | | | ☐ No | | | | |
| _ | | | | | | ☐ Yes | | \$_ | | |
| | | | | | | □ No | | | | |
| | | | | | | ☐ Yes | | +\$ | | |
| - | | | - | ſ | | | \neg | -Ψ | | |
| | | | | | | | | ору | | |
| 33e. | Total average monthly payment. A | dd lines | s 33a through 33d | | \$ | 436.23 | - 1 | tal ere=> | \$ 43 | 6.23 |
| ot | ther property necessary for your No. Go to line 35. Yes. State any amount that you | suppor must p | cured by your primary residence, a vert or the support of your dependents? ay to a creditor, in addition to the payme property (called the <i>cure amount</i>). Next, or | nts list | ted in | | | | | |
| | 60 and fill in the information | | | uiviue i | Uy | | | | | |
| Name | e of the creditor | 1 | dentify property that secures the debt | | | Total cure amount | | | Monthly cur amount | е |
| -NO | NE- | | | | \$ | | ÷ 60 | = \$ | | |
| | | | | ſ | | | \neg | | | |
| | | | | Total | \$ | 0.00 | to | opy tal ere=> | \$ | 0.0 |
| | | | priority tax, child support, or alimony pankruptcy case? 11 U.S.C. § 507. | - that | | | | | | |
| | No. Go to line 36. | | | | | | | | | |
| | | | se priority claims. Do not include current | or on | going | | | | | |
| | priority claims, such as the | • | | | ¢ | 2.22 | | ^ | ¢. | |
| | Total amount of all past- | ue prio | nty cialms | | \$ | 0.00 | ÷ 6 | J = | Φ | 0.0 |

Debtor 1

Pletz, Chad D Debtor 1 Case number (if known) 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link foBankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. No. Go to line 37. ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense if you were filing under Chapter 13 here=> 436.23 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 7.700.05 expense allowances Copy line 32, All of the additional expense deductions 719.41 Copy line 37, All of the deductions for debt payment 436.23 8.855.69 8.855.69 Total deductions \$ Copy total here.....=> Part 3: Determine Whether There is a Presumption of Abuse 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 8,673.37 39b. Copy line 38, Total deductions 8,855.69 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy -182.32 -182.32 Subtract line 39b from line 39a here=>\$ For the next 60 months (5 years) x 60 Сору -10,939.20 -10,939.20 39d. **Total.** Multiply line 39c by 60 39d. here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41. *Subject to adjustment on 4/01/16, and every 3 years after that for cases filed on or after the date of adjustment.

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| Debtor 1 | Plet | z, Chad D | Case number (if known) |
|----------|--------|---|--|
| | | | |
| 41. | 41a. | Fill in the amount of your total nonpriority unsecured debt. If you filled Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. | |
| | 41b. | 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(|)(i)(1) |
| | | Multiply line 41a by 0.25 | |
| of | your i | ne whether the income you have left over after subtracting all allowed dunsecured, nonpriority debt. e box that applies: | deductions is enough to pay 25% |
| | | 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Th</i> p Part 5. | There is no presumption of abuse. |
| | | 39d is equal to or more than line 41b. On the top of page 1 of this form, che. You may fill out Part 4 if you claim special circumstances. Then go to Par | |
| Part 4: | Giv | ve Details About Special Circumstances | |
| | | ve any special circumstances that justify additional expenses or adjustice alternative? 11 U.S.C. § 707(b)(2)(B). | tments of current monthly income for which there is no |
| I | No. Go | o to Part 5. | |
| | | Il in the following information. All figures should reflect your average monthly expured to the control of the | expense or income adjustment for each item. |
| | ne | ou must give a detailed explanation of the special circumstances that make the ecessary and reasonable. You must also give your case trustee documentation ljustments. | |
| | G | Sive a detailed explanation of the special circumstances | Average monthly expense or income adjustment |
| | _ | | \$ |
| | _ | | \$ |
| | _ | | \$ |
| | _ | | |
| Part 5: | Sig | gn Below | |
| | _ | gning here, I declare under penalty of perjury that the information on this state | ement and in any attachments is true and correct. |
| | X /s | / Chad D Pletz | |
| | C | had D Pletz gnature of Debtor 1 | |
| D | ate M | arch 31, 2016 | |
| | | M/DD/YYYY | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-11187 Doc 1 Filed 03/31/16 Entered 03/31/16 16:10:55 Desc Main Document Page 70 of 72

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | Pletz, Chad D | | Case No. | |
|--------|--|--|------------------------|--------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR D | DEBTOR |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing cope rendered on behalf of the debtor(s) in contemplation of contemplation. | of the petition in bankruptcy | , or agreed to be paid | d to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 2,335.00 |
| | Prior to the filing of this statement I have received | | \$ | 1,200.00 |
| | Balance Due | | \$ | 1,135.00 |
| 2. Т | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. 7 | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | I have not agreed to share the above-disclosed compens firm. | sation with any other person | unless they are men | nbers and associates of my law |
| İ | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names | | | |
| 5.] | In return for the above-disclosed fee, I have agreed to rende | er legal service for all aspec | ts of the bankruptcy | case, including: |
| t c | Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statemet Representation of the debtor at the meeting of creditors at the provisions as needed | ent of affairs and plan which | n may be required; | |
| 6. I | By agreement with the debtor(s), the above-disclosed fee de | oes not include the following | g service: | |
| | C | CERTIFICATION | | |
| | certify that the foregoing is a complete statement of any agankruptcy proceeding. | greement or arrangement fo | r payment to me for | representation of the debtor(s) in |
| M | arch 31, 2016 | /s/ Paul Idlas | | |
| Do | ate | Paul Idlas Signature of Attorne Paul Idlas | у | |
| | | 1099 N Corporate Grayslake, IL 600 | | |
| | | paul@idlas.com | | |
| | | Name of law firm | | |

BANKRUPTCY RETAINER AGREEMENT

(Only for Legal Services Rendered Prior to the filing of the Chapter 7 Bankruptcy Petition)

| CLIENT: Chad Pletz | - |
|--|------------|
| Client has retained the services of PAUL R. IDLAS, Attorney, to represent Client with the preparation and filing of a Chapter 7 Bankruptcy Petition. | respect to |

PAUL R. IDLAS will provide the legal services necessary to file the Chapter 7 Bankruptcy Petition, including but not necessarily limited to the following:

- Consult with Client with respect to Client's financial situation and the advantages and disadvantages of filing a Chapter 7 Bankruptcy Petition and advise of the possibilities of filing a bankruptcy petition under either Chapter 11, 12 or 13;
- 2. Discuss with Client possible alternatives to filing a Bankruptcy Petition;
- 3. Obtaining information from Client necessary to file a Chapter 7 Bankruptcy Petition;
- 4. Pay the \$335.00 filing fee to the Bankruptcy Court Clerk and file the Chapter 7 Bankruptcy Petition.

Client agrees to retain the services of PAUL R. IDLAS, Attorney, as described above, and further agrees to:

- 1. Provide PAUL R. IDLAS with the information he deems necessary in his professional opinion to prepare the Chapter 7 Bankruptcy Petition, including but not limited to:
 - a. Full disclosure of all assets and liabilities;
 - b. Valuation of assets;
 - c. Names, addresses, account numbers and amounts owed to each creditor;
 - d. Truthful answers to the questions contained in the Statement of Financial Affairs.
- 2. Pay PAUL R. IDLAS the sum of \$ 1260. 50 prior to the filing of the Chapter 7 Bankruptcy Petition.

**ADDITIONAL POST FILING SERVICES."

EXCEPT FOR THOSE SET FORTH BELOW, IF ANY, IN THE PARAGRAPH DEFINED AS TERMS OF THIS BANKRUPTCY RETAINER AGREEMENT AND WILL BE UNDER NO PROVIDE ANY FURTHER LEGAL SERVICES TO CLIENT TERMS OF THIS BANKRUPTCY RETAINER AGREEMENT AND WILL BE UNDER THE PARACTUAL BE UNDER THE THIS BANKRUPTCY PETITION IS FILED,

PAUL R. IDLAS CAN CONTINUE TO REPRESENT YOU IN THE CHAPTER 7

POST FILING RETAINER AGREEMENT, FOR THIS CONTINUED REPRESENTATION TO OCCUR. THIS RETAINER AGREEMENT, THE POST FILING RETAINE AND CLIENT TO ENTER INTO A SEPARATE AGREEMENT, THE POST FILING RETAINE AND CLIENT TO ENTER INTO A SEPARATE AGREEMENT, THE POST FILING RETAINE AND CLIENT TO ENTER INTO A SEPARATE AGREEMENT, THE POST FILING POST FILING PAUL WISHES TO THE POST FILING PAUL WISH PAUL WISHES TO THE POST FILING PAUL WISHES PAUL WISHES TO THE POST FILING PAUL WISHES PAUL WISHES PAUL WISHES PAUL WISHES PAUL WISH PAUL WISH PAUL WISHES PAUL WISHES PAUL WISH
Client acknowledges:

- I. Client is under no obligation whatsoever to retain the services of PAUL R. IDLAS to represent Client in any aspect of the Bankruptcy Proceeding after filing of the Chapter 7 Bankruptcy Petition. If client wishes to retain the services of PAUL R. IDLAS, Client must enter into a separate fee agreement for the legal services to be performed after filing.
- 2. Client acknowledges and understands that if Client does not enter into the Post Filing Retainer Agreement with PAUL R. IDLAS, the PAUL R. IDLAS will file a Petition to Withdraw and client will not object to withdrawal.
- 3. It may be necessary for client to file additional documents, including but not limited to:
- a. Additional or amended schedules;
- b. Statement of Financial Affairs;
- c. Other documents depending upon the circumstances of the case.

Client acknowledges that this Bankruptcy Retainer Agreement has been explained to Client and understood by Client.

| CLIBAT | Date: 15-16 |
|---------------|---------------|
| CLIENT D. LAK | PAUL R. IDLAS |